

ATTORNEY DOCKET NO
1454 - CA

PATENT
U.S. 10/662,788

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Trotter et al.
Serial No.: 10/662,788
Filed: September 15, 2003
Title: METHOD FOR OUTPUT EDGE - BALANCING IN PULSE WIDTH
MODULATION SYSTEMS AND DATA CONVERTERS USING THE
SAME
Confirm No.: 9513
Art Unit: 2819
Examiner: Williams, Howard L.

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sirs:

AMENDMENT RESPONSE TO OFFICE ACTION

In response to the Official Action mailed April 23, 2004, Applicants respectfully request that the Examiner reconsider the rejection of the claims in view of the following amendments thereto, and the comments set forth below.

Amendments to the Claims are reflected in the listing of claims, which begins on Page 2 of this paper.

Remarks/ Arguments begin on Page 9 of this paper

12/22/2004 AJOHNS01 00000004 200821 10662788

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PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

1454-CA (P279US)

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|-----------------|--------------|
| TOTAL CLAIMS | 21 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 21 minus 20 = * | 1 |
| INDEPENDENT CLAIMS | 3 minus 3 = * | 0 |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * 17 | Minus ** 21 | = |
| Independent | * 2 | Minus *** 3 | = 4 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus ** | = |
| Independent | * | Minus *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | * | Minus ** | = |
| Independent | * | Minus *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY
TYPE ☐OR OTHER THAN
SMALL ENTITY

| RATE | FEE | | RATE | FEE |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 375.00 | OR | BASIC FEE | 750.00 |
| X\$ 9= | | OR | X\$18= | 18 |
| X42= | | OR | X84= | |
| +140= | | OR | +280= | |
| TOTAL | | OR | TOTAL | 268 |

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 9= | | OR | X\$18= | |
| X42= | | OR | X84= | 352 |
| +140= | | OR | +280= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | 352 |

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 9= | | OR | X\$18= | |
| X42= | | OR | X84= | |
| +140= | | OR | +280= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 9= | | OR | X\$18= | |
| X42= | | OR | X84= | |
| +140= | | OR | +280= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |